

## MEMORANDUM FOR COMMITTEE MEMBERS:

FROM: Lt Gen Paul K. Carlton, Jr., Chair of the Council

SUBJECT: DoD Prevention, Safety, and Health Promotion Council (PSHPC) Meeting 4 January 2001

1. The PSHPC meeting was convened at 1000 hrs in Pentagon Room 1E801#4. Attendees are as follows:

Lt Gen Carlton, Air Force Surgeon General (Chair)  
LTG Vesser USA (ret), Deputy to the Special Assistant to the Deputy Secretary of Defense for Gulf War Illnesses (Distinguished Guest)  
Lt Col Atkins, Deputy Under Secretary Defense (Environmental Security) (Representative)  
COL Powers, Deputy Assistant Secretary of Defense (CPP) (Representative)  
Ms. Thompson, Assistant Secretary of the Air Force (Manpower, Reserve Affairs, Installations and Environment) (Representative)  
Mr. McLaurin, Assistant Secretary of the Army (Manpower and Reserve Affairs) (Representative)  
CDR Moulton, Assistant Secretary of the Navy (Manpower and Reserve Affairs) (Representative)  
Mr. Downs, Deputy Chief of Staff, (Manpower and Reserve Affairs) [(DCS) (M&RA)], Marine Corps (Representative)  
RDML Mayo, Director for Logistics, J-4, The Joint Staff (Representative)  
Mr. Fatz, Deputy Assistant Secretary Army Environmental Safety Occupational Health  
Col Mata, Deputy Assistant Secretary Air Force Environment, Safety and Occupational Health (Representative)  
Ms. Corliss, Assistant Deputy Chief of Staff, Air Force Personnel (Representative)  
Col Sommesse, Tricare Management Activity (Representative)  
Dr. Claypool, Executive Director Military and Veterans Health Coordinating Board  
CAPT Kunken, Commandant United States Coast Guard (Representative)  
BG Martinez, Army Surgeon General (Representative)  
BG Heilman, Deputy Chief of Staff and Personnel, Army  
RDML (sel) Hart, Navy Surgeon General (Representative)  
Mr. Reinhard, Office of the Assistant Secretary of the Navy (Installations and Environment)  
Col Larsen, SD HQMC  
CAPT Garbow, Navy Safety (Representative)  
CAPT Cepek, Chief of Naval Personnel (Representative)  
COL Welliver, Director of Army Safety (DASAF) (Representative)  
Mr. Phillips, Air Force Safety (Representative)

### Members Not Present:

RADM Clinton, Assistant Secretary of Defense (Health Affairs)  
Mr. Maldon, Assistant Secretary of Defense (Force Management Policy)

2. **OLD BUSINESS:** The 11 October 2000 minutes were approved as written.

3. **NEW BUSINESS:**

#### A. Administrative Remarks

The Chair indicated that he had written introductory remarks for the PSHPC website and that these had already been posted. Again, he encouraged all members and interested parties to access the website at <http://www.tricare.osd.mil/hpp>. Finally, he informed the membership that the PSHPC website as of 1 January 2001 was linked to the Military and Veterans Health Coordinating Board website ([www.mvhcb.gov](http://www.mvhcb.gov)).

Replacement PSHPC Committee Chair/Committee Member letters of appointment have been signed and mailed for forwarding through the individuals chain of command. The Chair again emphasized their intent is to emphasize the importance of the PSHPC's work. Letters will be updated on a quarterly basis. Should any difficulties arise, the Chair asked that CAPT Murphy be contacted.

The revised PSHPC Charter has completed the formal coordination process through the Service Secretariats and DoD offices. The Charter revision currently is in the Office of the General Council for review and comment

The Chair recognized LTG Dale Vesser USA (ret), the Deputy to the Special Assistant to the Deputy Secretary of Defense for Gulf War Illnesses. LTG Vesser (ret) is the Chair's distinguished guest and is present on behalf of the Operational Stress and Military Resiliency Workgroup.

The Chair welcomed Mr. Michael Downs [(DCS) (M&RA)] (representative) and RDML (sel) Hart (Navy SG) (representative) to the Council.

The Chair introduced COL Benjamin Withers as the new chair of the Joint Preventive Medicine Policy Group (JPMPG) replacing Col Dana Bradshaw and LTC Scott Goodrich as the new chair of the Self-Reporting Tools (SRT) committee replacing Col Teresa Sommese. He recognized CAPT Frances Stewart as the chair of the newly established Suicide Prevention and Risk Reduction Committee (SPARRC). CAPT Stewart will be presenting the committee's initial draft action plan and proposed committee charter.

The Chair iterated the intent to have at least two committee chairs brief their action items and timelines at each meeting. In March 2001 the Self-Reporting Tools and the Alcohol Abuse Tobacco Use Reduction Committee will be scheduled. Also, the Suicide Prevention and Risk Reduction Committee will present their final draft action plan and charter.

#### B. PSHPC Committees:

Selected PSHPC Committee chairs presented briefings in response to taskers from the Council meeting in October 2000.

##### (1.) Injury Occupational Illness Prevention (IOIPC):

COL DeFraités updated the council on the current status of IOIPC initiatives. This included action plan timelines and Gantt charts. COL DeFraités stated that the Joint Service Safety Chief's (JSSC's) at their 16 November 2000 meeting did not concur with the establishment of an Armed Forces Injury Prevention Support Center (AFIPSC). It was their opinion that the AFIPSC would duplicate existing service efforts and that the requirements for manpower and resources exceed anticipated benefits. COL DeFraités further cited that the IOIPC action plan is behind schedule due to lack of dedicated resources and funding constraints.

Considerable discussion ensued and the Chair indicated that the JSSC's concerns centered on a perceived increase in bureaucracy rather than the concept of injury and occupational illness prevention. He further emphasized the need for better cross-fertilization with the focus being on process improvement. Several Safety representatives cited examples of existing collaborations between the Safety Centers and the Service Medical departments but stated that some of these are in their infancy developmentally. Council members concurred that further collaboration is vital in light of the annual costs involved.

The Chair asked COL DeFraités to research the Service's current ongoing efforts in the area of Safety and Injury and Occupational Illness Prevention and present those results at the next meeting. Consensus was reached that a refinement in action plan goals and objectives might need to be undertaken.

##### (2.) Joint Preventive Medicine Policy Group (JPMPG)

COL Withers briefed the current status of JPMPG activities using timelines and Gantt charts. Many of the JPMPG action items will be due in the July 2001 timeframe. The Chair again emphasized the critical role the JPMPG plays in Readiness and Force Health Protection. COL Withers will brief these items again in July 2001.

##### (3.) Suicide Prevention and Risk Reduction Committee (SPARRC)

CAPT Stewart briefed the PSHPC on the background and philosophy surrounding the committee's origin. She presented the initial timelines for the proposed Suicide Prevention action plan objectives as well as the draft action plan and committee charter. Council members will review the action plan and charter and submit comments to CAPT Stewart for inclusion into the final draft that hopefully will be ready for approval at the March 2001 meeting. If the Council concurs, the SPARRC action plan and charter will be sent to the Under Secretary of Defense (Personnel and Readiness) for formal approval.

### C. Safety in the Acquisition Process:

In response to the Chair's request, Mr. Schilder presented another report on "Safety in the Acquisition Process." Again, addressed were topics related to "Weapons Systems Acquisition Safety and Occupational Health (SOH) Interface." A detailed overview of the two Department of Defense (DoD) Environmental Safety and Occupational Health (ESOH) Acquisition Workshops held in November and December 2000 was presented. Recommendation's centered on four primary areas of improvement:

- (1.) Fostering better ESOH requirements identification
- (2.) Improving ESOH expertise to Weapons System Program Managers
- (3.) Incorporating a review of ESOH issues in the DoD and Component Acquisition Program Review Process
- (4.) Including ESOH Requirements in the Technology Process

Over the next 3-4 months an ESOH working group will develop an action plan to address each of these four areas. The Working Group hopefully, will be able to offer suggestions on the specific roles played by:

- (1.) "System Safety/Health" expertise at various Safety and Occupational Health Centers
- (2.) Safety and Health acquisition policies
- (3.) Safety and Health oversight at milestone decisions

Mr. Schilder also, presented a brief on several Safety and Occupational concerns identified by the Contingency Operations Workshop held in October 2000. Concerns centered on the following areas:

- (1.) The effect that accidents, injuries and illnesses have on combat capability
- (2.) The lack of overarching doctrine and policy on force integration and force health protection
- (3.) Non-institutionalization of Risk Management strategies during Joint Operations
- (4.) Lack of resolution by Joint Task Forces Commanders and their staffs of high-risk problems identified by the individual services

The conclusions reached by the attendees stressed the need for:

- (1.) Improved doctrine especially in the areas of Environmental Protection Safety and Occupational Health to support joint or combined forces
- (2.) Identification of gaps in policy and development of policy recommendations on ESOH integration and deployment doctrine in joint operations
- (3.) Coalition partner development to support interoperability and ESOH doctrine to cover coalition partners

After discussion the Chair asked RDML Mayo and BG Martinez to examine these concerns and offer possible solutions. These will be presented at the March 2001 meeting.

### D. Water Intoxication:

Dr. Sawka presented an overview on Water Intoxication and described the clinical presentation, pathophysiology, contributing factors, and service experiences with this condition. The current status of research efforts regarding new water product and treatment guideline development was explained. A possible genetic explanation for water intoxication in certain predisposed individuals was presented. The Chair felt that this condition, while uncommon, was of such importance that it should be incorporated into the core curriculum of operational military provider training.

### E. Operational Stress and Military Resiliency:

Ms. Dee Morris presented a brief on the Operational Stress and Military Resiliency Working Group established under the auspices of the Under Secretary of Defense (Personnel and Readiness). Ms. Morris presented a short overview of the history behind the group, the results of the June 2000 conference "Leaders and Operational Stress" hosted by Office of the Special Assistant for Gulf War Illness, Health Affairs and the Chairman of the Joint Chiefs of Staff, Director for Logistics (J-4). At the Chair's request members were asked to respond regarding the incorporation of this group as a committee under the PSHPC. This will be an item for the next Council meeting.

### F. PSHPC Concept of Operations Paper and SRT Update

The Chair requested members review these two Read Ahead files. The concept of operations paper outlined the historical background of the PSHPC, its accomplishments, and the need for a dedicated Tri-Service staff to monitor and coordinate DoD Prevention activities. The SRT update presented the current status of the SRT initiatives. The PSHPC paper will be discussed at the next Council meeting. LTC Goodrich will formally present an SRT update in March 2001.

G. "Future Directions"

The Chair asked members to consider the possibility of a Strategic off-site and the development of a long-term PSHPC plan for the next meeting.

4. **NEXT MEETING:**

Members will be notified of the date for the next meeting, which will occur in March 2001.

5. **ADJOURNMENT:**

The meeting adjourned at 1115.

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PAUL K. CARLTON, JR.  
Lieutenant General, USAF, MC, CFS  
Surgeon General